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7590

05/27/2004

RABIN & BERDO, P.C.
 Suite 500
 1101 14th Street, N.W.
 Washington, DC 20005



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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/661,482	09/15/2003	Lien-Che Ho	COR 133	9234

TITLE OF INVENTION: METHOD OF VERIFYING A MASK FOR A MASK ROM

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	08/27/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
TSAL, H JEY	2812	438-014000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required.

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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(A) NAME OF ASSIGNEE

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**MACRONIX INTERNATIONAL CO., Hsinchu 300, Taiwan, R.O.C.
 LTD.**

Please check the appropriate assignee category or categories (will not be printed on the patent) ☐ individual ☒ corporation or other private group entity ☐ government

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(Authorized Signature) Steven M. Rabin (Date) June 15, 2004
 Steven M. Rabin
 (Reg. No. 29,102)

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